

WATER WELL REPORT

STATE OF WASHINGTON

32/1E/6 R

Application No.

Permit No.

(1) OWNER: Name H. L. MORGAN Address 1025 N. SCENIC HTS. Rd. OAK HARBOR WASH

(2) LOCATION OF WELL: County ISLAND SE 1/4 SE 1/4 Sec 6 T 32 N. R 1 E W.M.

Bearing and distance from section or subdivision corner 130' N 668' W. OF SE. COR SECT. 4

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☒
Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 3
New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 8 inches.
Drilled 288 ft. Depth of completed well 288 ft.

(6) CONSTRUCTION DETAILS:
Casing installed: 8" Diam. from 0 ft. to 277 1/2 ft.
Threaded ☐ " Diam. from _____ ft. to _____ ft.
Welded ☒ " Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☒
Type of perforator used _____
SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☒ No ☐
Manufacturer's Name JOHNSON
Type STAINLESS Model No. 37
Diam. 8 Slot size 15 from 277 1/2 ft. to 288 ft.
Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☒ Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18 + ft.
Material used in seal BENTONITE
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name WEBER INDUSTRIES
Type SUBMERSIBLE HP 10

(8) WATER LEVELS: Land-surface elevation 250 ft.
Static level 243 ft. below top of well Date APR 18
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap. valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☒ No ☐ If yes, by whom? H. L. MORGAN
Yield: 106 gal./min. with 9 ft. drawdown after 6 1/2 hrs.
" " " " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
<u>ZERO</u>	<u>252</u>				
<u>2 MIN.</u>	<u>243</u>				

Date of test 2/28/79
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes ☒ No ☐

(10) WELL LOG:

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
SANDY	2	20
SANDY CLAY	20	25
SAND	25	176
SANDY CLAY	176	206
DRY SAND	206	225
GRAY SANDY CLAY	225	254
WATER FORMATION - FINE	254	262
WATER SAND - GOOD	262	277
VERY CLEAN WATER SAND	277	288
CLAY	288	289

0123347

Work started APRIL, 19 78 Completed MAY, 19 78

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME WHID BEY WELL DRILLERS
(Person, firm, or corporation) (Type or print)

Address OAK HARBOR WASH

[Signed] Dennis Jale
(Well Driller)

License No. 129 Date APR, 19 78



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: _____

AGA822

RECORD VERIFICATION (check ☒ one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☐ Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name 77148 SEAVIEW W Co

Last Name _____

Street Address _____

City _____

State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address CORNER OF SWANTOWN / CROSBY

City _____

County _____

T _____ N R _____ W M Sec _____

1/4 of the _____

FOR AGENCY USE ONLY

Latitude _____

Longitude _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available

- ☐ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Digital Altimeter
- ☐ Topographic Map
- ☐ Other _____

☐ Location marked on topographic map (please attach)☐ Location marked on air photo (please attach)

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Permit No

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Type of perforator used.

SIZE of perforations in by in
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Gravel placed from ft to ft

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Type of water? Depth of strata

Method of sealing strata off

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 above mean sea level
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Artesian pressure lbs per square inch Date
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Date of test 2/28/79

Bailer test gal/min with ft drawdown after hrs

Artesian flow g.p.m. Date

Temperature of water Was a chemical analysis made? Yes ☒ No ☐

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CLAY	288	289

Work started APR 14, 19 78 Completed MAY, 19 78

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief

NAME WHIDBEY WELL DRILLERS
 (Person, firm, or corporation) (Type or print)

Address OAK HARBOR WA

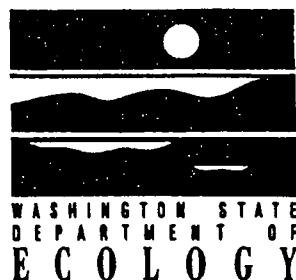
[Signed] Dennis Jale
 (Well Driller)

License No 129 Date APR, 19 78

(USE ADDITIONAL SHEETS IF NECESSARY)



FOR SALE BY U S GEOLOGICAL SURVEY, FEDERAL CENTER, DENVER, COLORADO OR WASHI
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST



UNIQUE WELL I D NUMBER A B R O I I
X Y Z 1 2 3

WELL TAGGING FORM

Date of Field Visit 7/22/94 By KURT LARSEN

ADDITIONAL WELL IDENTIFIERS

Department of Health System ID Number 77148Y Source Number SO 2

USGS Site Identification

RECORD VERIFICATION

- ☒ Well Report available (*please attach*)
☐ Well Report not available
☐ Verification inconclusive

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

Name _____

Street address _____

City _____ State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address _____

City _____ County _____

T N R W M Sec $\frac{1}{4}$ of the $\frac{1}{4}$

Latitude 48 ° 16 ' 59 "

Longitude 122° 42' 40"

- ☐ GPS (raw data)
- ☐ GPS (corrected)
- ☒ Topographic Map
- ☐ Survey
- ☐ Computer generated
- ☐ Other

Elevation at land surface 242 . (feet/meters (circle one))

- ☐ Digital Altimeter
☒ Topographic Map
☐ Other

Additional information, if available:

☒ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

Water Right # G1-26973 P

Priority Date 2/11/93

Circle one

Application

Permit

Certificate

Claim

Exempt

WELL CHARACTERISTICS

Physical Description of Well (size of casing, type of well, housing, etc): 8" STEEL CASING, HEAD STRUCTURE IN INSULATED BOX, 3' x 3' x 6'

Location of Well Identification Tag. TOP OF CASING

Was Supplemental Tag needed for ease of identifying well?

☒ NO

☐ YES

If yes, where was tag placed? _____

Scale 1 24,000 (1"=2,000')

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

Indicate the location of the well within the Section by drawing a dot at that point.

SECTION 6

COMMENTS: _____

